SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Authorized Agent: _

Address to send permit _

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



Permit #:	19-0416
Date:	11-25-19
Amount Paid:	\$75 11-19-19
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

Checks are made pa	ayable to: E	ayfield C	, ,	Department.		eld Co. Zoning	Dept.		EUL OU	FININK (NO) DENICII	\		
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. FILL OUT IN INK (NO PENCIL) TYPE OF PERMIT REQUESTED → ⅓ LAND USE □ SANITARY □ PRIVY □ CONDITIONAL USE □ SPECIAL USE □ B.O.A. □ OTHER														
Owner's Name:	REQUES	IED-	≯ LANI	DUSE SA		PRIVY [ng Address:	CONDIT	City/State/	☐ SPECIAL	USE LI B	O.A. L	OTHER		
						A.	ıf.				715.	682.537		
Address of Propert	Address of Property: City/State/Zip:										Cell Pl	ione:		
												696-880		
Contractor: Contractor Phone: Plumber:														
												er Phone:		
Authorized Agent:	(Person Sign	ning Applic	cation on behal	f of Owner(s))	Agent	Phone:	Agent Mail	ling Address (i	nclude City/State	/Zip):	Writte	en Authorization		
			r a	1 111	1	1					Attack			
PROJECT : E 330 of W 12 of W 7 Tax ID# Recorded Document: (Showing Ownershi														
Legal Description: (Use Tax Statement)									20187	_ ~	571894			
		5/6	Gov't Lot	Lot(s)	CSM	Vol & Page CS	SM Doc#	Lot(s) No.	Block(s) No.	Subdivision				
1/4,	1	/4			. 002014/3040.1									
75		,	((Town of:				Lot Size	Acr	eage		
Section	, Towi	nship 占	1 <u>6</u> N, R	ange <u></u>	N		Lsdel.					29		
			** ***											
				n 300 feet of Riv of Floodplain?		am (incl. Intermittent) escontinue		e Structure	s from Shoreline		our Propert Floodplain	Are Wetland		
☐ Shoreland —				NA STATE OF THE PARTY OF THE PA							Zone?	Present? Ves		
	□ Is P	roperty	, Land Withir	n 1000 feet of La		id or Flowage escontinue —		e Structure	s from Shorelin	e : feet	□ Yes	□ Yes		
✓ Non-Shoreland											□ No			
y Non-Shoreland														
Value at Time							Total	# of						
of Completion						bedro			at Type of	Type o				
* include donated time &		Proje	Et	# of Stori	es	Foundation	on			Sanitary Sys		on		
material							prope	erty	is on t	iie propert	γ.	proper		
	☐ Nev	/ Const	ruction	1-Story		□ Basement	□ 1		1unicipal/City			☐ City		
\$	✓ Addition/Alteration					☐ Foundation				v) Sanitary Specify Type:				
4000.00	versior		2-Story		Slab			anitary (Exists						
			xisting bldg)							or				
		erty	1033 011						Compost Toilet					
					+-				lone					
P. Caller Co., et al.	1.6	The second	1. 16									0.0		
Proposed Const		mit beir	ід арріїей то	r is relevant to i	t)	Length: 309	++	Wid	th: 12 C+		Height: Height:	8 ++		
						Ectificity.		WIG			rieight.			
Proposed U	se	/				Proposed Struct	ture			Dimen	sions	Square		
			Duinainal	Characterist /fine						, v		Footage		
	}		-	e (i.e. cabin, hu		ture on property	/)			(X		-		
		Ш	residelic	with Loft	untill !	oriack, Etc.)				(X				
Z Residential	Use			with Lore with a Porch with (2 nd) Porch)			
)			
				with a Deck						(x)			
				with (2 nd) D	eck		ı			(X)			
☐ Commercia	l Use			with Attach	ned Gai	rage				(X)			
			Bunkhou	se w/ (□ sanita	ry, <u>or</u> [sleeping quarter	rs, <u>or</u> 🗌 coo	oking & food	orep facilities)	(X)			
	ŀ		Mobile H	ome (manufact	ured da	te)			(*)	(x)			
			Addition	/Alteration (ex	(plain)	Deck w	Poof			(30 X	12)	360		
		Z		essory Building (explain))			
☐ Municipal l	Use		Accessor	y Building (exp	nam) _		Accessory Building Addition/Alteration (explain)							
☐ Municipal (Use		Accessor	y Building (exp			in)			(X)			
☐ Municipal \	Use		Accessor	y Building (exp			in)			(X)			
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			Accessor Accessor Special U Condition Other: (e)	y Building (exp y Building Add se: (explain) nal Use: (explain (plain) OBTAIN A PERMIT	n)	Alteration (expla	N WITHOUT A	PERMIT WILL	RESULT IN PENALTI	(X (X (X)	vledge that I (we) am		
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(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Copy of Tax Statement If you recently purchased the property send your Recorded Deed

Attach

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE elow: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL (1) Show Location of: **Proposed Construction** (2) Show / Indicate: North (N) on Plot Plan (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4) Show: All Existing Structures on your Property (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (7) Show any (*): (*) Wetlands; or (*) Slopes over 20% See Attached

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurem	nent	Description	Measur	ement
Setback from the Centerline of Platted Road	180	Feet	Setback from the Lake (ordinary high-water mark)		Feet
Setback from the Established Right-of-Way	147	Feet	Setback from the River, Stream, Creek	11)17	Feet
			Setback from the Bank or Bluff	10	Feet
Setback from the North Lot Line	942	Feet			
Setback from the South Lot Line	186	Feet	Setback from Wetland	NA	Feet
Setback from the West Lot Line	540	Feet	20% Slope Area on the property	☐ Yes	No
Setback from the East Lot Line	415	Feet	Elevation of Floodplain	NA	Feet
Setback to Septic Tank or Holding Tank	10	Feet	Setback to Well		Feet
Setback to Drain Field	20	Feet			
Setback to Privy (Portable, Composting)		Feet			

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

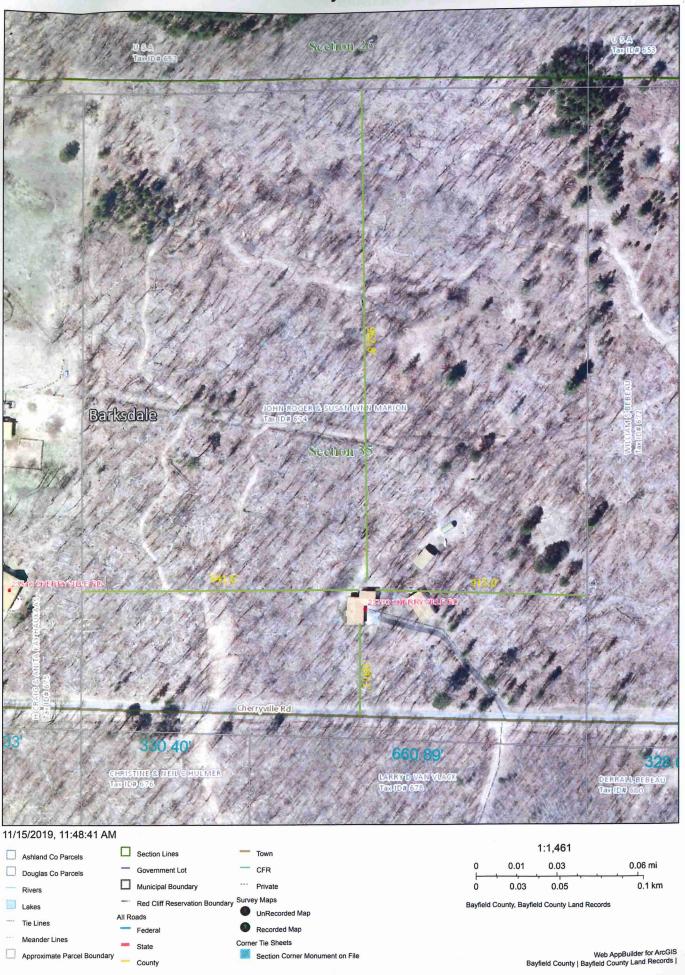
NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	09856	Sanitary Date: 10 - 29 - 83							
Permit Denied (Date):	Reason for Denial:									
Permit #: 19-0416	Permit Date: 11-25	rmit Date: 11-25-19								
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Recondance Yes (Fused/Contigue Yes Yes	ous Lot(s)) 🔲 No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No		□ No □ No					
Granted by Variance (B.O.A.) ☐ Yes ✓ No Case #:	#:									
Was Parcel Legally Created Was Proposed Building Site Delineated ✓ Yes □ No		Were Property Line	es Represented by Owner Was Property Surveyed	Yes No No						
Inspection Record: owner on-site and lode compliant	1 site well-n	miked. App	Pins	Zoning District (F1 Lakes Classification (
Date of Inspection: 11 - 22 - 19	Inspected by:	ld Norwood		Date of Re-Inspection:						
Condition(s): Town, Committee or Board Conditions Atta										
Signature of Inspector: Toda Not wood	contracted obtained pri	A UDC permit fro UDC inspection age ior to the start of cons naintain setbacks.	ency must be	Date of Approval:	5-19					
Hold For Sanitary: Hold For TBA:	Hold For Affi	davit: 🗆	Hold For Fees:							

Bayfield County Web AppBuilder



State or Federal Also Be Required

SANITARY - 69856 SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-0	416			Issued	то: Jo	John & Susan Marion								
E 660' of Location:			N o		238	Section	35	Township	48	N.	Range	6	W.	Town of	Barksdale
Covition		-		-	ja	Blo	ale	Cul	Subdivision					CCM#	
Gov't Lot	Lot Lot Bl				CK	Sul	Daivisio	on ———				CSM#			

For: Residential Addition: [1- Story; Deck with Roof (30' x 12') = 360 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): A UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction if required. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

November 25, 2019

Date